

<i>SERFF Tracking Number:</i>	<i>NSIC-125843224</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>National States Insurance Company</i>	<i>State Tracking Number:</i>	<i>40503</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.003 Plan C</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>Plan C Withdrawal from Sale</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## Filing at a Glance

Company: National States Insurance Company

Product Name: Plan C Withdrawal from Sale    SERFF Tr Num: NSIC-125843224    State: ArkansasLH

TOI: MS051 Individual Medicare Supplement -    SERFF Status: Closed    State Tr Num: 40503  
Standard Plans

Sub-TOI: MS051.003 Plan C

Co Tr Num:

State Status: Filed-Closed

Filing Type: Form

Co Status:

Reviewer(s): Stephanie Fowler

Authors: William Morrison,  
Anastacia Behrens, Jackie Phillips

Disposition Date: 11/07/2008

Date Submitted: 10/08/2008

Disposition Status: Filed

Implementation Date Requested: 01/01/2009

Implementation Date:

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Informational

Domicile Status Comments: Notified Missouri,  
our state of domicile, of our intent to cease  
sales on October 2, 2008.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 11/07/2008

State Status Changed: 11/07/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

This filing is to notify you of our intent to cease the sale of our Medicare Supplement Plan C (CSM-1(05)), approved by the Department on November 29, 2005.

Our decision to cease sales of this plan is based on low sales volume in recent years, and the introduction of other

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standard plans that are more competitively rated.

We currently have 2,302 CSM-1's in force nationally, and 2 in the state of Arkansas.

We propose to cease the new sales of the CSM-1(05) effective January 1, 2009. We certify that we will continue to service the current Medicare Supplement Plan C policyholders. We are also aware that our decision to cease sales means that we may not file for approval a new policy of the same benefit plan for five years.

Please let us know if you need additional information.

## Company and Contact

### Filing Contact Information

Anastacia Behrens, abehrens@nstates.com  
 1830 Craig Park Court (800) 868-6788 [Phone]  
 St. Louis, MO 63146 (314) 878-8118[FAX]

### Filing Company Information

National States Insurance Company	CoCode: 60593	State of Domicile: Missouri
1830 Craig Park Court	Group Code:	Company Type: Life and Health
Ste. 100		
St. Louis, MO 63146	Group Name:	State ID Number:
(314) 878-0101 ext. [Phone]	FEIN Number: 43-0825796	
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## Filing Fees

Fee Required? No  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
National States Insurance Company	\$0.00	10/08/2008	

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TOI:	MS051 Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS051.003 Plan C
Product Name:	Plan C Withdrawal from Sale		
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	11/07/2008	11/07/2008

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## **Disposition**

Disposition Date: 11/07/2008

Implementation Date:

Status: Filed

Comment: Thank you for your notice, please see our attached letter.

Rate data does NOT apply to filing.

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes

November 7, 2008

Ms. Anastacia Behrens  
National States Insurance Company  
1830 Craig Park Court, Ste. 100  
St. Louis, MO 63146

Re: Medicare Supplement - Withdrawal of Plan C

Dear Ms. Behrens:

This is to acknowledge receipt of your letter notifying the Department pursuant to AR Rule 27, Sec. 15 D (1) (a) of your intent to discontinue the marketing of Medicare Supplement Plan C effective January 1, 2009. We do regret your decision to leave this market.

As you are aware, by discontinuing the availability of this coverage, the Company will not be permitted to file for approval new forms of this type for a period of five (5) years.

If you have any questions, please let us know.

Sincerely,

*Stephanie Fowler*

Stephanie Fowler  
Rate and Form Analyst  
Life and Health Division  
(501) 371-2768  
e-mail: [Stephanie.fowler@arkansas.gov](mailto:Stephanie.fowler@arkansas.gov)

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## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

### Review Status:

**Bypassed -Name:** Certification/Notice 10/02/2008  
**Bypass Reason:** N/A to this filing. We are not filing a form for approval. Intent of filing is to notify Department of our intent to cease sales of the CSM-1(05) policy.  
**Comments:**

### Review Status:

**Bypassed -Name:** Application 10/02/2008  
**Bypass Reason:** N/A to this filing. We are not filing a form for approval. Intent of filing is to notify Department of our intent to cease sales of the CSM-1(05) policy.  
**Comments:**  
Filing intent is to cease sale of our already approved, Medicare Supplement Plan C plan.

### Review Status:

**Bypassed -Name:** Health - Actuarial Justification 10/02/2008  
**Bypass Reason:** N/A to this filing. We are not filing a form or rate for approval. Intent of filing is to notify Department of our intent to cease sales of the CSM-1(05) policy.  
**Comments:**

### Review Status:

**Bypassed -Name:** Outline of Coverage 10/02/2008  
**Bypass Reason:** N/A to this filing. We are not filing a form for approval. Intent of filing is to notify Department of our intent to cease sales of the CSM-1(05) policy.  
**Comments:**  
Filing intent is to cease sale of our already approved, Medicare Supplement Plan C plan.